

**SUPPLEMENTAL  
DECLARATION FOR UTILITY  
OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.67)**

Attorney Docket Number

1527.007

First Named Inventor

Case, et al.

COMPLETE IF KNOWN

Application Number

10/820,918

Filing Date

04/08/2004

Art Unit

3774

Examiner Name

P. Preblich

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INTRALUMINAL SUPPORT DEVICE WITH GRAFT

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

04/08/2004

as United States Application Number or PCT International

Application Number

10/820,918

and was amended on (MM/DD/YYYY)

I hereby declare that the subject matter of the ☐ attached amendment ☐ amendment filed on \_\_\_\_\_ was part of the invention and was invented before the filing date of the original application, above identified for such invention.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(b) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## SUPPLEMENTAL DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

Direct all correspondence to: <input type="checkbox"/> The address associated with Customer Number:				42715	
OR <input checked="" type="checkbox"/> Correspondence address below					
Name J. Matthew Buchanan, Dunlap, Codding & Rogers, P.C.					
Address P.O. Box 16370					
Address					
City Oklahoma City		State OK		ZIP 73113	
Country US		Telephone 1-405-607-8600		Fax 1-405-607-8686	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
Name of Sole or First Inventor:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Brian C.			Family Name or Surname Case		
Inventor's Signature					Date
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Mailing Address 424 Cyprus Circle					
Mailing Address					
City Lake Villa		State IN		ZIP 60046	
				Country US	
Name of Second Inventor:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Jacob A.			Family Name or Surname Flagle		
Inventor's Signature					Date
Residence: City New Palestine		State IN		Country US	
Mailing Address 6804 W. Stinemyer Road					
Mailing Address					
City New Palestine		State IN		ZIP 46163	
				Country US	
<input checked="" type="checkbox"/> Additional inventor(s) or legal representative(s) are being named on the 2 <sup>nd</sup> supplemental sheet(s) PTO/SB/ 02A or 02LR attached hereto.					

PTO/SB02A (07-07)  
 Approved for use through 06/30/2010. GMS 0659-0032  
 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Ram H				Paul, Jr.			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Bloomington		IN		US		US	
1251 W. Church Lane							
Mailing Address							
City		State		Zip		Country	
Bloomington		IN		47403		US	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Andrew K.				Hoffa			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Bloomington		IN		US		US	
1412 W. Adams Hill Circle							
Mailing Address							
City		State		Zip		Country	
Bloomington		IN		47403		US	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Michael L.				Garrison			
Inventor's Signature		<i>Michael Garrison</i>		Date		FEB 29, 2008	
Residence: City		State		Country		Citizenship	
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Mailing Address							
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Indianapolis		IN		46260		US	

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# DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet

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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Joseph F.		Obermiller	
Inventor's Signature		Date	
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1906 Blueberry Lane			
Mailing Address			
City	State	Zip	Country
West Lafayette		IN 47906 US	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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